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GOSFORTH URBAN DISTRICT COUNCIL

Northumberland



of the

MEDICAL OFFICER OF HEALTH

and the

SENIOR PUBLIC HEALTH INSPECTOR

for the

year ended 31st December, 1962



Council Chambers, GOSFORTH, Northumberland.

Tel: Gosforth 52053

OFFICERS OF THE PUBLIC HEALTH DEPARTMENT.

Medical Officer of Health, South Area Health Office, Newburn Road, Throckley. Tel: 674365. Madge Hopper, M.B., B.S., B.Hy., D.P.H.

Senior Public Health Inspector

George Stenger, M.A.P.H.I.

Additional Public Health Inspector.

Neil Scott, M.A.P.H.I.

Clerks :-

Mrs. C.E. Raine

Miss R. Godley.

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ANNUAL REPORT, 1962.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my Annual Report for the year 1962.

The population of the Urban District again slightly increased, this year by 180 to 26,780.

The birth rate showed a slight rise and approximated the national level; the increase was in female births.

There was a very slight increase in the death rate and in the number of deaths of residents of the district. The natural increase in population kept up to the higher level of recent years.

Unfortunately the infant mortality rate increased considerably to 33.4 per thousand live births from 17.4 in 1961. The increase was in the deaths of infants under one year of age from prematurity, congenital abnormalities and also from infective causes. There had been no death from any infective cause in the previous two years.

In regard to individual causes of death those from vascular lesions of the nervous system again showed an increase. Deaths in the general classification of heart and circulatory diseases dropped by 24 but there has been an appreciable increase in male deaths from coronary disease.

The total number of deaths of residents from malignant neoplasms rose to 53 from 48 the previous year, those from lung cancer showing an appreciable increase to 13 from 8 in 1961 and 10 in 1960. There had been 16 deaths from lung cancer in 1959, and it was hoped that the fall in the two succeeding years would be maintained. There is further need for counselling non-smoking especially among adolescents; for the younger part of the community propaganda by Health Education films in the schools is being stepped up.

Deaths from malignant neoplasm of other sites showed no significant change.

Deaths from diabetes decreased from 4 in 1961 to one this year.

There was a very unwelcome rise of fatal motor accidents to 4. Fatal home accidents dropped to 5 from 7 in 1961; in 1960 there were 3. In addition there were 8 fatal accidents in the hospital.

A more satisfactory feature was the absence of any fatal home accident in a young child.

It is very pleasing to be able to report that no death from tuberculosis was registered in contrast to two deaths in each of the three preceding years. Allied to this was an impressive fall in the incidence of the disease to 9 notifications of pulmonary tuberculosis from 14 in 1961. The curative value of the present drugs together with improved social conditions are having marked effect on this former dreaded disease.

Notifications of infectious fevers reached the low level of 65 compared with 532 in 1961, This was entirely due to the non prevalence of measles, this being the year of bi-ennial recession. Notifications of whooping cough, scarlet fever and dysentery all showed a decrease on last year and no case of food poisoning was notified for the fourth successive year.

Primary or virus proumonia notifications, however, rose to 17 from 13 in 1961 and occurred during eight months of the year.

Possibly the poor weather in the summer had some effect in this respect.

The infectious disease record for the year was marred by two notifications of acute poliomyelitis, both paralytic. One was a mild case but the other, a baby of seven months, had a considerable degree of residual paralysis. There were a number of young families in the neighbourhood of the two cases and it was helpful to be able to give oral vaccine to those likely to be 'at risk' immediately the first case was suspected. The general level of the previous vaccinations among those children was high. No further case occurred.

It was again disappointing to find that by the end of the year no definite progress had been made towards a smoke control area. Discussions took place during the course of the year and possibly some progress will be made in the future.

The Public Health Inspectors made 800 visits to the food premises in the district which number 172. Formal action was taken in two cases under the Food Hygiene (General) Regulations, 1960, and convictions obtained.

Work under the Milk and Dairies Regulations continued steadily as shown in the text of the report.

The Old Peoples Welfare Committee continued to carry out their useful work all during the year. The system of friendly visiting increased as did the more social side. The Meals on Wheels service run by the Womens Voluntary Organisations also expanded.

The co-operation between official and voluntary organisations was drawn even closer and both are learning to work in conjunction with each otherin the care of the elderly.

The various activities of the Health Department continue to work smoothly.

In presenting this report I have again to express my appreciation to the Chairman and Members of the Health Committee for their interest and encouragement, and to the Clerk and other officials, for their co-operation. I am grateful to Mr. Stenger, Public Health Inspector, to Mr. Scott, the Additional Inspector, who has recently taken up another appointment, and to the olerical staff, Mrs. Raine and Miss Godley, for their capable services during the year.

I am,
Mr. Chairman, Ladies and Gentlemen,
Your obedient Servant,
M. HOPPER,
Medical Officer of Health.

1. VITAL STATISTICS.

POPULATION.

The Urban District which is almost entirely residential in character, being a dormitory of Tyneside, covers a small compact area. There are few industries, but a number of business premises, shops and offices. The majority of the inhabitants work in various parts of Tyneside.

The population in 1962 according to the Registrar General's mid year estimate was 26,780 an increase of 180 on that of 1961. There has been a small but steady increase of population over the last five years amounting to a total of 1,780.

BIRTHS.

The total number of births registered during the year was 449 (219 male and 230 female) compared with 402 (217 male and 185 female) in 1961. There was an increase of 47 in the total number of births chiefly in female births which increased by 45.

There were 15 illegitimate births i.e., the same number as last year. The numbers of illegitimate births have been slightly increasing/over the last few years.

The birth rate (corrected for age and sex distribution) for the urban district was 17.7 and that for the country was 18.0. The rates for the previous year was 16.0 for the district and 17.4 nationally.

There were 9 still births this year i.e., the same number as in the previous year. The still birth rate for the district was 19.6 per thousand live and still births as against 18.1 for England and Wales. The comparative rates in 1961 were 21.9 for the district and 18.7 for the country.

DEATHS.

391 deaths (195 male and 196 female) were registered compared with 379 (180 male and 199 female) in 1961. There were 90 deaths of long term residents in St. Nicholas Hospital which were included in the total of 391 so that the deaths of residents of the district numbered 301 compared with 285 in 1961 and 289 in 1960.

The death rate (corrected for age and sex distribution) was 11.9 per thousand population and that for the country was the same figure. The rates for 1961 were 12.5 for the urban district and 12.0 for England and Wales.

NATURAL INCRASE IN THE POPULATION.

The excess of births over deaths (excluding the deaths in the chronic hospital) was 148 as against 117 in 1961 and in 1960. This natural increase of the population has kept to a higher level in the last five years than prior to that.

INFANT MORTALITY.

The number of deaths of infants under one year of age considerably increased to 15 from 7 in 1961 and 5 in 1960. Nine deaths occurred in the first week, five being due to prematurity, 2 to prematurity allied with other factors, one to a congenital deformity and one to cerebral oedema and precipitate labour.

After the first week and in the first month of life, 3 infant deaths were registered, 2 being due to congenital abnormalities and one to prematurity. There were 3 deaths after the first month and in the first year of life, all being due to infective causes. This is most unusual, there has been no death from an infective cause for some time.

In 1962 deaths from prematurity as a primary or secondary cause increased by 4, those from congenital abnormality by one, and those from infective causes by 3. This forcibly points out the need for constant and meticulous care in the field of ante natal and child care, and allows no cause for complacency or resting on previous laurels.

The infant mortality rate was 33.4 per thousand live births as against 20.7 for England and Wales. The rates for the previous year were 17.4 for the district and 21.4 for England and Wales.

The infant mortality rate for 1962 is the highest recorded for this district since 1954.

MATERNAL MORTALITY.

For the second successive year it is encouraging to report that no death attributable to pregnancy or child birth was registered. The maternal mortality rate for the country was 0.35.

INDIVIDUAL CAUSES OF DEATH.

Deaths from vascular lesions of the nervous system increased to a total of 66 from 56 in 1961, including 11 deaths from this cause occurring in the chronic hospital. There were 55 deaths of residents in this classification compared with 37 the previous year.

Classifying heart and circulatory diseases in one large group, the total number of deaths was 145, 42 being in the chronic hospital. This left a total of 103 deaths of residents in the group compared with 127 in 1961, and 120 in 1960.

There was therefore a general decrease in deaths in this group, but those from coronary disease and angina increased by 10 in males and decreased by 8 in females.

Deaths from malignant neoplasms (including 8 chronic hospital deaths) totalled 61 compared with 53 (including 5 hospital deaths) the previous year.

Deaths from malignant neoplasm of the stomach, breast, uterus, and those classified as 'of other sites' were similar in number in both years, but those from cancer of the lung and bronchi increased considerably to a total of 15 (including 2 hospital deaths) from 9 in 1961 and 11 in 1960 (including one hospital death in each year). There has been a slight decrease in deaths from lung cancer over the last two years after the large number of 16 deaths registered in 1959. Deaths of 12 males in this classification ranged from 49 to 65 years of age. Several had a history of previous chronic disease and seven were engaged in heavy industry; several were moderate to heavy cigarette smokers.

No death from leukaemia was registered. There had been one the previous year.

Deaths from diabetes decreased to one from 4 in 1961.

Deaths from respiratory diseases totalled 37 of which 7 were residents in the chronic hospital. In 1961 the total number was 38 of which 11 were in the chronic hospital. Deaths of residents in this grouping increased very slightly in 1962.

There was again one death from influenza as in the two previous years.

Unfortunately deaths from motor vehicle accidents which had dropped to 2 the previous year, rose to 4 in 1962. Two of these fatal accidents were due to motor car collisions and 2 deaths (both female) to being knocked down by a bus and car respectively.

There were 15 deaths classified as from 'all other accidents' compared with 16 in 1961. Eight occurred in the hospital, 6 to falls causing fractures in persons already suffering from chronic diseases. and 2 were due to accidental impaction or regurgitation of food in mentally disordered patients. Five other fatal accidents occurred to residents of the district. Three were due to falls at home in elderly persons aged 94, 92 and 68 respectively. One was due to the explosion

of a boiler behind a fireplace and another to barbiturate poisoning. A more satisfactory feature was that there was no death of a young child from a fatal accident, but the number of deaths of elderly people shows the need for increased care of the elderly and for propaganda for all ages on accidents in the home.

There was one death from suicide as in the two previous years.

II. TUBERCULOSIS.

No death from any form of Tuberculosis was registered. There had been 2 in each of the three previous years. The death rate for the country was 0.059 per thousand population.

There was an impressive fall in the incidence of pulmonary tuberculosis to 9 (3 male and 6 female) notifications in the year. The notifications were mainly in the age groups 20-45 years, 2 were in the older age group 55-65 years and over, and one only in the 15-20 years age group. Notifications of residents which had risen to 14 in 1961 dropped to 9, the decrease being in both sexes; 4 in male and 3 in female notifications.

Two cases of non-pulmonary tuberculosis (both female) one in the 10-15 years age group and one in the 55-65 years age group were notified in the year as against 3 last year.

The decline in mortality and a steady decrease in incidence has been particularly noticeable during the last two years. This is in keeping with the very welcome general trend throughout the country.

A number of transferred cases from other districts occurs each year. This year there were 11; 10 pulmonary and one non-pulmonary. There were 12 in 1961 and 15 in 1960. The number of these transferred cases during the last few years now stands at 114.

Patients from this district are under the care of the Senior Chest Physician at the Chest Clinic, New Bridge Street, Newcastle upon Tyne and admission to the Walkergate Hospital or to a sanatorium when required is almost immediate.

Family contacts and other contacts are kept under review at the Chest Clinic and home visiting is done, when necessary, by the health visitors.

Special attention is given by the school doctors to children at risk. B.C.G. vaccination, with the parents consent, is given to those children and to certain older age groups at school.

The Council always pay particular attention to the housing conditions of tuberculous patients and their families, though unsuitable conditions now seldom arise in the district.

Unit 1 A of the Newcastle Mass Radiography Service of the Regional Hospital Board last visited the district in April, 1961. No visits were paid in 1962 but future visits will no doubt be made in accordance with the regular schedule.

III. GENERAL EPIDEMOLOGY.

Sixty-five cases of infectious diseases were notified in the year as against 532 in 1961, 40 in 1960 and 539 in 1959. This year saw the usual bi-ennial recession of measles, which disease now accounts for the majority of notifications.

Measles. Twenty cases were notified as against 467 in 1961 when a large number of cases occurred mainly in the first seven months of the year.

Whooping Cough. Notifications numbered 7 during the year, compared with 19 in 1961. The cases occurred in the Autumn of the year. With the number of children receiving protection against the disease rising steadily each year, the fall in incidence is quite impressive as shown by the graph overleaf. The disease when it does occur is usually of a very mild type and is mainly among incompletely vaccinated children, or among those awaiting a reinforcing injection.

Scarlet Fever. There was only one notification of this disease all through the year. There were 10 in 1961 and 7 in 1960. The occurrence of the disease is rapidly declining and will, it is hoped, continue to do so although the possibility of drug resistant strains of streptococci cannot be ruled out.

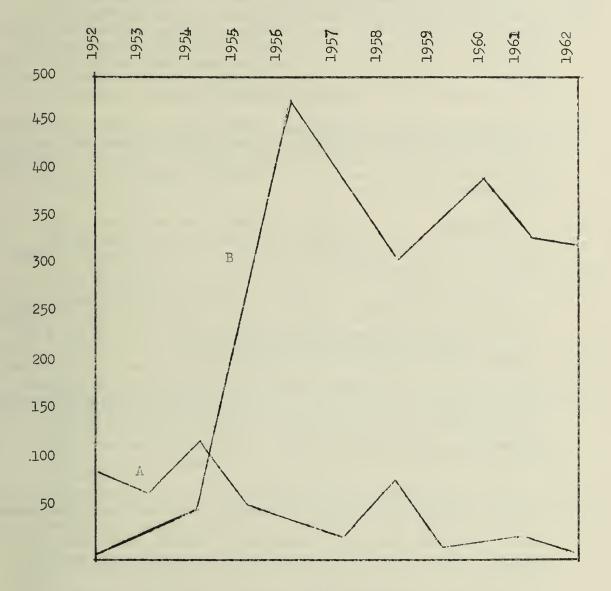
Dysentery. Notifications of dysentery leclined to 13 from 18 in 1962. The 13 cases occurred in 8 families, all in the early months of the year. Investigations revealed the presence of several positive symptomless excreters in the families. Treatment was given by the family doctors and both patients and positive contacts were kept under surveillance until clear. Some of the cases took several weeks to do so.

In the latter months of the year one or two suspected cases were investigated with negative results.

Food Poisoning. No case of food poisoning has been notified in the urban district for the fourth year in succession.

In November on information supplied by one of the general practitioners, investigation was made into three suspected cases occurring in one family. Bacteriological examinations of stool

Graph showing incidence of Whooping Cough in the Urban District and the number of children who received protection against the disease over a ten year period.



Line \underline{A} shows the number of cases of Whooping Cough each year. Line \underline{B} shows the number of children who received prophylactic injections against Whooping Cough each year.

specimens were negative for the entire family however and no particular article of food could be suspected.

A case of salmonellosis found to be due to Salmonella typhimurium occurred early in August. The patient had contracted the illness, which was one of some severity, whilst on holiday in Naples. After initial treatment atWalkergate Hospital the patient received treatment from her family doctor and was kept under surveillance until negative stool specimens had been obtained. Stool specimens from the family contacts proved negative on bacteriological examination.

Primary and Virus Pneumonia. Notifications of primary pneumonia increased to 17 from 13 in 1961, and 11 in 1960. There were one or two notifications each month for eight months of the year. The months in which no notifications of the disease were received were February, June, August and October.

Influenza. One death from influenza was registered. As for many years past the general practitioners kept watch on any increase in the prevalence of influenza as distinct from the common cold and its complications.

Acute Poliomyelitis. In June a notification of a case of acute poliomyelitis (paralytic) was received in respect of a boy of 3 years of age living at Coxlodge. The onset of symptoms was on May 27th and the child was admitted to Walkergate Hospital on May 28th. The diagnosis was confirmed on June 11th by the isolation of polio virus in the stools. The illness was of a mild type but there was some slight paralysis of the legs. All family and close contacts received a dose of oral vaccine immediately. Five of the older children in the family had previously received a complete primary course of vaccination against poliomyelitis. The two youngest children, including the little patient, had not been done.

The second notification occurred in July. A baby girl of seven months was admitted to Walkergate Hospital on July 9th with suspected poliomyelitis and this was confirmed on July 1lth. The illness was mild at first but increased in severity. She was discharged from hospital on August 8th still unable to sit up unsupported and with residual paralysis in both legs. The baby was unvaccinated against the disease. Oral vaccination was given immediately to the family and close contacts when the case was reported as suspected.

Both families live in fairly close proximity and though not intimate there could have been casual contact.

With the co-operation of the staff of the Clinic the vaccination state of each child in the vicinity was gone into. The children generally were very well vaccinated but for various reasons, chiefly domestic, several children had not completed their courses. Special efforts were made to rectify this. The parents responded extremely well to all appointments.

No further case occurred.

IV. HOUSING.

Sixteen houses were completed in 1962, a total of 663 having been erected by the Council since 1944.

In addition to these in the course of the year 26 new houses were privately built.

Mr. Wyld, the Engineer and Surveyor, has kindly supplied these figures.

The number of applications for Council houses was 889 compared with 865 in 1961 and 813 in 1960. The Housing Officer has kindly furnished these figures.

V. NATIONAL ASSISTANCE ACT, 1948. NATIONAL ASSISTANCE (AMENDMENT) ACT, 1951.

Section 47. Removal to suitable premises of persons suffering from grave chronic disease or being elderly and infirm and living in insanitary conditions and are in need of care and attention.

No formal action was necessary this year under this Section. In June, investigation was made into the conditions under which an elderly man was living. His admission to Preston Hospital was arranged by his own doctor. Several cases were kept under review and under the care of the health visitors, the provision of home helps being especially useful.

Section 50. Burial or Gremation of the Dead. No burial took place under this section.

VI. MILK AND DAIRIES REGULATIONS, 1949. FOOD HYGIENE, FOOD AND DRUGS ACT, 1955.

Since January 1st, 1962, samples of milk, other than those of producer retailer have been taken by the County Health Inspector.

35 samples of Tuberculin Tested (Farm Bottled) Milks were procured and submitted to the Methylene Blue Keeping Quality Test. 33 samples representing 94.3% of the number submitted for examination satisfied the test. The corresponding figure for 1961 was 97.0%.

33 samples of ice-cream were submitted for examination by the Methylene Blue Test, with the following results: - 24 were placed in Grade 1; three in Grade 2; three in Grade 3 and 3 in Grade 4.

Constant efforts were made to improve samples in grades 2, 3 and 4.

During the year nearly 800 visits were made to various food premises in the district which number 172. Formal action was taken in two cases under the Food Hygiene (General) Regulations 1960 for failing to provide an adequate supply of hot and cold water or of hot water at a suitably controlled temperature. Convictions were recorded in 'both cases.

During the year three complaints were received alleging the presence of extraneous matter in food and one complaint alleging the delivery of a pint of milk in a bottle which was not in a state of thorough cleanliness. In one instance legal proceedings were instituted and the firm was fined £10 plus costs. No action was taken in the other three cases due to the fact that in one case the complainant was not prepared to give evidence and in the other two cases the Council felt there was some doubt as to facts.

VII. ATMOSPHERIC POLLUTION.

After discussion at various times no positive progress was made with regard to the establishment of a smoke control area, the Council feeling there might be difficulty in obtaining smokeless fuel in sufficient quantities.

VIII. NOISE ABATEMENT.

No new complaints have been received in this connection but further complaints have been received with regard to a noise nuisance which was investigated in 1961. Further investigations were still proceeding at the end of the year.

IX. SEWERAGE AND SEWAGE DISPOSAL.

There was no change in the sewerage and sewage disposal systems from last year. Out of a total of well over 9,000 premises less than a dozen premises do not discharge into a public sewer. In these isolated instances disposal is by means of small installations consisting of a septic tank and filter bed, the purified effluent being discharged into water courses. These small installations will gradually be superseded in future developments.

X. HEALTH EDUCATION.

The Clinic and Library both occupy central positions in the district and are especially suitable for the display of posters and the distribution of leaflets on health subjects. Talks on Health Education and film shows are regularly given at the Clinic and also to various groups and womens organisations in the district. Films on 'Smoking and Health' were shown to older children at the schools by one of the school doctors specially assigned to the subject.

XI. MORTUARY.

During the year 30 bodies were placed in the mortuary and 20 post mortems carried out. In the previous year 21 bodies had been placed in the mortuary and 20 post mortems carried out.

The mortuary serves a very useful purpose both for this and adjoining districts.

XII. WELFARE OF OLD PEOPLE.

The Old Peoples Welfare Committee which commenced seven years ago continued their valuable work. With an increase to 53 in the number of friendly visitors the scope in this part of the work was increased, 32 new names being added to the list.

The Committee have the use of a room at the Clinic once a week and this has proved a most useful focal point both for meetings and for the old people to come for advice and help.

The chiropody service continued, 803 treatments being given from July 1961 to July 1962. Owing to the large numbers involved this service is now being operated by the County Council.

The social side of the work expanded, car outings being arranged and a special summer outing.

This information has been kindly supplied by Mrs. Dunford Smith, Honorary Secretary of the Old Peoples Welfare Committee.

The Meals on Wheels Service run by the Womens Voluntary Service increased to the supply of 72 meals a week delivered by voluntary drivers.

The recreational side of the work is catered for by four Over 60 Clubs which are affiliated to the Committee.

The close co-operation between the Local Authority Services, particularly the health visitors and the Home Help Service and the various voluntary organisations of the district was well maintained.

XIII. WATER SUPPLY AND SANITARY CIRCUMSTANCES OF THE DISTRICT.

Detailed information is contained in the report of the Senior Public Health Inspector.

HEALTH SERVICES IN THE DISTRICT.

A. REGIONAL HOSPITAL BOARD.

- 1. Hospitals. There are two hospitals in the Urban District. They are the St. Nicholas Hospital, a large hospital for the treatment of mental disorders, and the Sanderson Orthopaedic Hospital for treatment of children.
- 2. Tuberculosis Service. Patients attend the New Bridge Street Clinic, Newcastle upon Tyne under the care of the Senior Chest Physician, Dr. Verity. Treatment is provided at the Walkergate Hospital or at one of the various sanatoria of the region or at the Childrens Hospital, Stannington.
- B. LOCAL AUTHORITY SERVICES. Services (3) (4) (5) (6) and (7) and the care of the buildings in Section (2) are administered by the South Area Health Sub-Committee of the Northumberland County Council.
- 1. Home Nursing and Midwifery. Three district midwives serve the urban district and the general nursing is done by three nurses. Mr. Ward carries out male nursing for the County. The names and addresses and telephone numbers are as follows:-

District Midwife	Mrs. D. Hopper 40, Linthorpe Road, Gosforth	Gosforth	53448
17	Mrs. G. Simpson 8, Church Avenue Gosforth	Gosforth	54123
19	Mrs. D. Jones 49, Amherst Road, Fawdon	Gosforth	5 3 553
General Nurse	Mrs. A.E. Ashforth 4, Hayes Walk, Wideopen.	Wideopen	2353
19	Miss D.S. Curran 1 Church Lane, Gosforth.	Gosforth	51836
11	Mrs. E. Main 66, Hyde Terrace Gosforth	Gosforth	57467
Male Nurse	Mr. A. Ward 57 Halton Drive Woodlands Park north	Wideopen	2484

2. Materity and Child Welfare Service. The whole of the urban district is served by the Clinic at Church Road in which regular sessions are held for the care of babies, children and expectant mothers. There is a well equipped dental department and sessions held for relaxation classes, speech therapy, orthopaedic consultations, the treatment of eye defects and skin diseases and for other special groups such as vaccination and immunisation sessions for children and adults.

The extensions to the building completed in January 1961 have been a great benefit to the service which continues to expand in scope.

3. Ambulance Service. The depot at Wideopen which is the central depot for the County serves the urban district and is situated three miles to the north. A driver superviser is in control with 19 driver attendants and radio control assistants working on a 24 hour basis.

A maintenance and repair service for the ambulances which was commenced in 1961 proved successful and was further extended during the year.

Ambulances of the Wideopen Depot which covers the urban district of Gosforth, Longbenton and adjacent parts of Castle Ward made 7427 journeys (7796) carried 25,565 patients (26,772) including 429 (666) accident and emergency cases and 3575 (3674) stretcher cases and did a mileage of 183,073 (194,306) miles. Figures in brackets relate to 1961.

4. Immunisation and Vaccination.

Diphtheria. As in former years immunisation against diphtheria was carried out at the Clinic, at the schools and by the general practitioners of the district. During the year 324 (343) children including 321 (330) 0-4 years and 3 (13) 5-14 years received a primary course of immunisation and 323 (477) children received a reinforcing injection.

In 1961 an intensive campaign at the schools was carried out so that the figures were a little higher that year.

Whooping Cough and Tetanus Prophylaxis. A total of 323 children (33) received protection by means of the triple antigen of diphtheria, whooping cough and tetanus which is now almost universally used.

Vaccination against Smallpox. Primary vaccinations against smallpox reached the unprecedented figure of 1112 compared with 245 in 1961. The number of vaccinations of babies was similar in both years but in the older age groups 5-14 years and 15 years and

over, no less than 793 primary vaccinations were done.

Revaccinations numbered 1580 of which 1237 were in persons 15 years and over. In 1961 the number of revaccinations was 83. There was an almost panic rush to be vaccinated following the occurrence of the disease in Bradford and other parts of the country.

Poliomyelitis Vaccination. The campaign against poliomyelitis continued throughout the year. Oral vaccination was made available to the public in March 1962.

By the end of the year in the South Area, which comprises the Urban Districts of Gosforth, Newburn, Prudhoe and the Rural District of Castle Ward, 2,253 children and persons had had a course of three doses of the oral vaccine and 4,508 had reinforcing doses after previous primary courses of injection. 24,174 children born between 1943 and 1962, 3,912 persons born between 1933 and 1942, and 6,500 in other groups had had a course of two injections of Salk vaccine. The number of persons given a third injection of Salk vaccine was 28,323 and the number given a fourth injection was 7,950.

5. Home Help Service. 274 persons, exactly the same number as last year received the services of a home help for varying periods in the course of the year. There were 29 (34) confinements, 11 (13) cases of acute illness, 224 (214) aged and infirm persons, 6 (7) blind persons and 4 (3) cases of tuberculosis. The number of old people served by the service slightly increased.

This particularly valuable service continued to function smoothly throughout the year and is of special help in keeping the aged and infirm comfortable in their own homes.

- 6. Care and After-care. Regular meetings of the Gosforth and Castle Ward After-care Sub Committee were held and aid in the provision of extra milk, travelling expenses of relatives to hospital, additional heating, clothing etc., were given in suitable cases. In addition comforts not obtainable from any official source were at times provided to patients suffering from tuberculosis and other lung and cardine diseases.
- 7. Nursing Care Committee. The Nursing Care Committee which purchases and maintains a stock of nursing equipment for loan to residents of the district continued its useful function. 271 (323) persons were loaned nursing requisites comprising 471 (503) separate articles. In addition 26 (20) invalid chairs were out on loan.

As a number of visits had to be paid to renew applications for loaned articles the ladies of the Committee formed a rota to do this.

Renewals of several articles and of equipment were made during the year as became necessary.

The more specialised items such as those for paraplegics are provided by the South Area Health Sub Committee.

STATISTICAL SUMMARY AND SOCIAL CONDITIONS.

Particulars of District.

Area	1739 acres	
Registrar General's estimated population	26,780	
Number of inhabited houses according to rate		
book at 31st March, 1962	8827	
Sum represented by Penny Rate	£1,547. 10.	0
Rateable value at 31st March, 1962,	£380,428.	

Extracts from Vital Statistics.

	Males.	Females.	Total.
Live births (legitimate) Live births (illegitimate) Still births Deaths Birth rate per 1,000 population Still birth rate per 1,000 live and	210 9 4 195	224 6 5 196	434 15 9 391 17•7
still births Death rate per 1,000 estimated popu			19.6 11.9

Deaths from Puerperal Causes.

Death rate of infants under 1 year.

All infants per 1,000 live births	33.4
Legitimate infants per 1,000 live births	33.4
Illegitimate infants per 1,000 live births	-

Deaths.

Deaths from Malignant Diseases (all ages)	61
Deaths from Measles (all ages)	-
Deaths from Gastritis, Enteritis and Diarrhoea	
(all ages)	-

CAUSES OF DEATH

(taken from the Registrar General's Return).

	Males.		Femal	es.
All causes	195	(40)	196	(50)
Tuberculosis, respiratory		(40)		()-/
Tuberculosis, other	_		_	
Syphilitic disease	1		_	
Diphtheria	_		_	
Whooping Cough	-		-	
Meningococcal infection	-		-	
Acute poliomyelitis	-		-	
Measles	-		-	
Other infective and parasitic diseases	_		-	
Malignant neoplasm, stomach	3 12	(1) (2)	8	(1)
Malignant neoplasm, lung, bronchus	12	(2)	8 3 7	
Malignant neoplasm, breast	-			(1)
Malignant neoplasm, uterus	-		1	, ,
Other malignant and lymphatic neoplasms	15	(2)	12	(1)
Leukaemia, aleukaemia	-		_	
Diabetes	-	(-)	1	(0)
Vascular lesions of nervous system	28	(3) (3)	38	
Coronary disease, angina	51	(3)	38	(4)
Hypertension with heart disease	2	(1)	3	(2)
Other heart disease	21	(15)	30	(17)
Other circulatory disease	14	(3)	10	
Influenza	- 0	(7)	1	(7)
Pneumonia	8	(3)	11	(7)
Bronchitis	12	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	3	
Other diseases of respiratory system	2	(T)	-	
Ulcer of stomach and duodenum	7		_	
Gastritis, enteritis and diarrhoea	-		1	(1)
Nephritis and nephrosis	-		_	(+)
Hyperplasia of prostate	_		_	
Pregnancy, childbirth, abortion	3		1	
Congenital malformations	16	(3)	16	(4)
Other defined and ill-defined diseases	1	())		(4)
Motor vehicle accidents	5	(2)	3 8 1	(4)
All other accidents Suicide	_	(4)	1	(7)
	_		_	
Homicide and operations of war				

TABLE OF BIRTHS AND DEATHS FOR THE PAST 20 YEARS (1943-1962) compared with rates for England and Wales.

Ge	eneral Do	eath Rate.	Infant Mo Rate.	rtality	Birth Rate.			
Go	sforth	England & Wales.	England & Wales.	Gosforth England & Wales.				
1948 1949 1950 1951 1952	10.7 10.7 13.1 10.6 9.1 9.9 9.9 13.1 11.1 9.2 14.1 13.5 15.7 11.2 12.7 11.1 10.8 12.3 12.5	12.1 11.6 11.4 11.5 12.0 10.8 11.7 11.6 12.5 11.3 11.4 11.3 11.7 11.7 11.7 11.6 11.7	24.1 29.6 36.2 22.8 23.6 24.7 28.8 11.4 25.2 24.9 16.1 35.1 28.7 14.4 11.2 10.7 22.9 12.3 17.4	49 46 46 43 41 34 32 29.8 29.6 27.6 26.8 25.5 24.9 23.0 22.5 22.0 21.7 21.4	16.4 18.2 16.0 17.6 18.7 16.7 15.7 14.5 14.5 14.6 14.1 15.3 17.2 17.0 15.1 15.4 17.8 16.3 16.0	17.0 18.1 16.5 19.6 21.0 18.3 16.7 15.8 15.5 15.5 15.5 15.7 16.4 16.4 16.5 17.1 17.4		

INFANT MORTALITY.

Hydrops foetalis, Rhesus incompatibility, Prematurity	40 mins
Prematurity	2 hours
Premoturity	2 hours
Prematurity	1 day
Prematurity, maternal diabetes mellitis	1 day
Congenital left diaphragmatic hernia, Aplasia left lung	
and dextro cardia	l day
Prematurity	1 day
Prematurity	2 days
Cerebral oedema, Precipitate labour	4 days
Cardiac failure, Congenital heart disease	1 week
Hydrocephalus meningo, myelocele	l week
Prematurity	l week
Acute bronchitis	3 months
Acute epiglottitis, Pharyngitis	13 weeks
Meningitis	7 months
	, morroris

PREVALENCE AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

The table on page 23 gives the number and age groups of the cases of Infectious Diseases notified during the year.

Cases requiring hospital treatment and isolation are removed to the Hospital for Infectious Diseases, Walkergate. This hospital is controlled by the Regional Hospital Board.

PUBLIC HEALTH LABORATORY SERVICE.

Appended is a summary of Bacteriological Reports received from the Public Health Laboratory Service, Newcastle General Hespital, on specimens submitted by local medical practitioners and by the Health Department.

and by one near on separ onem.			
	Positive.	Negative.	Total.
Threat swabs for Haemolytic			
Streptococci	4	8	12
Nasal asabs for Haemolytic			
Straytococci	-	2	2
Throat swabs for Diphtheria	-	10	10
Throat swabs for Coagulase Positive			
Staphylococci	-	1	1
Nasal swabs for Coagulase Positive			
Staphylococci	_	2	2
Specimens of Faeces for pathogenic			
organisms	24	17.0	134
Specimens of blood for agglutination	i	-	1
Specimens of urine for pathogenic			
organisms	_	8	8
Throat swabs for Vincent's Angina	_	ī	ĭ
		-	
	29	742	7 77
	2)	146	-11

INFECTIOUS DISEASES.

Table of cases notified in the Urban District during 1962, set out in age groups.

			Food Poisoning	Malaria	Infective Encephalitis	Acute Poliomyelitis	Ophthalmia Neonatorum	Puerperal Pyrexia	Smallpox	Erysipelas	Pneumonia	Meningococcal Infect.		Paratyphoid	Enteric Fever	Measles	Whooping Cough	Diphtheria	Scarlet Fever		
	OV Vi	AND DESCRIPTIONS OF TAXABLE PARTY.	ı	1	1	22	í	Н	1	7	17	Н	13	1	1	20	7	1	Н	At all ages.	
A CONTRACTOR CONTRACTO	On .		1	ı	1	⊢	ı	1	1	t	2	ب	ш	1	1	1	1	ı	t	all Under	THE PERSON OF THE PERSON OF THE PERSON
ACTUAL OF SECTION	4		1	1	1	1	1	1	ı	1	1	1	1	1	1	2	12	t	1	1-2	
The second statement of the second se	7		1	t	1	ı	1	1	1	1	٢	1	2	1	1	V	Н	ı	1	2-3	
POTENTIAL PROPERTY OF THE PARTY	4		1	1	1	٢	ŧ	1	ı	1	1	1	1	ı	1	Н	2	1	1	3-4	The second second
Company of the second	6		1	t	1	1	1	t	1	1	1	1	2	1	1	W	٢	1	1	4-5	
	17		1	1	t	1	1	ı	1	t	Н	1	5	1	1	9	Н	t	ш	5-10	
			1	1	1	1	1	1	1	1	t	1	1	1	1	ı	1	t	1	5-10 10-15	The second second
	2		t	1	1	ı	1	1	1	t	1	1	1	ı	ı	2	ı	1	1	15-25	
The second second	5		•	1	1	ı	1	Н	1	ı	ш	1 1	3	1	t	ı	1	1	ı	25-45	
Charles - management	7	1	1 1	I	1	1	t	t	1 1	Ν,	5	ı	1	ı	1	ı	1	1	1	65 & 25 25-45 45-6, over	
	∞	1	1		1	1	I	ı	1 1		7	1	1	1	1.	1	ı	ı	1	65 & over.	

FOOD POISONING RETURN, 1962.

Food Poisoning Notifications (corrected) as returned to the Registrar General.

1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter
Nil	Nil	Nil	Nil
Cases otherwise as	certained.		
Nil	Nil	Nil	Nil.
Symptomless Exerct	ars,		
Nii	Nil	Nil	Nil.
Particulars of out	breaks.	Nil	
Single Cases.		Nil	

Salmonella Infections, not food borne.

PROPERTY S. 1975 ASTORPHICE SERVICE STREET, AND DESCRIPTION OF									
Salmonella (type)			No. of cases		Total No. of cases (out- breaks and single cases				
Typhi-murium	•••	_	-	1	1				
	(It is presumed that patient contracted the infection while on holiday in Naples in June 1962. Date and nature of onset of illness - 11.6.62 - Exhaustion, abdominal pain and diarrhoea)								

TUBERCULOSIS.

1 - 1 1 + (1 I.T) 1 + (1 I.T) - + (1 I.T) 2 + (1 I.T) - + (3 I.T) 2 + (1 I.T) - + (1 I.T) - + (1 I.T) 1 + (1 I.T) - + (1 I.T)	Respiratory Male
1 + (1 I.T) 2 + (1 I.T) 2 + (1 I.T) 6 + (4 I.T)	NEW CASES. atory Female
	Non-respira
1 + (1 I.T)	le P
	DEATHS. lespiratory Non-respiratory lale Female Male Female

26.

COMPARATIVE TABLE OF TUBERCULOSIS STATISTICS FOR RECENT YEARS.

	1948 1949 1950 1951 1952 1953 1954 1956 1957 1958 1958 1960 1960		
	12 16 16 17 17 17 18	Pu.	New (in
	13 14 14 14 15 16 17 17 17 17 17 17 17 17 17 17 17 17 17	lmonary	ew cases of including
	25 27 28 28 28 28 28 28	Tot.	on the ng inward
	101110040710010	Non	
	20010000000000000000000000000000000000	-pulmo	egister transfers
	201200140147157	nary Tot	
		Puln	
	. 8 5 5 7 1 1 1 1 1 1 1 1 2 3 8	nonary F.	Dea
	- 22 22 1 1 5 2 2 2 3 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Tot.	Deaths
	111111111111111111111111111111111111111	Non-	
	111110111111	pulmor	
	11110111100071	na ry Tot	
	40 555 559 59 74 82 104 1121 1121 1125 1142 1142 1142 1142	Pulm	No.
	30 30 30 30 30 445 447 447 447 447 447 447 447 447 447	Pulmonery F. F.	on register
	70 93 104 121 144 154 181 197 213 223 223 236 238	Tot	iste r
	125 145 146 147 147 147 147 147 147 147 147 147 147		at end
	22 22 23 24 25 25 25 25 25 25 25 25 25 25 25 25 25	mor	of
P. M. M. M.	22 23 23 25 25 25 25 25 25 25 25 25 25 25 25 25	ery.	Vear

27. TUBERCULOSIS REGISTER, 1962.

22 S G S • 20 G S	Non-pul	14	12 23	12	12
No. of cases remaining.	Pul. N	143	141 96	141	041
No. of cases removed from register	Non-pul	1 1	N 1	1 1	ııı
No. of corrections register	Pul.	2 2	4 5	м 1	7
No. of cases notified for the first time	Non-pul	1 1	1 [1 1	1 1
No. of cass notified f	Pul.	m 2	2 2	2 1	1 47
No. of cases on register at commencement of quarter.	Non-pul	14 22	14	12	12
No. of coregister commencer quarter.	Pul.	241	143	141	141
		Males Females	Males Females	Males Females	Males Females
Quarter ended		31st Mar. 1962	20th June 1962	30th Sept.1962	31st Dec.1962

ANNUAL REPORT OF THE SENIOR PUBLIC HEALTH INSPECTOR. FOR THE YEAR ENDED THE 31st DECEMBER 1962.

Mr. Chairman, Ladies and Gentlemen,

Once again, it gives me very great pleasure to submit my report for the year ended the 31st December 1962.

In previous years, almost without exception, I have had to report changes or vacancies in the inspectorate. During the year under review, there were no changes or vacancies in this particular connection, but for the first time, I have to report a change in the clerical staff.

Miss Oliver, who had been in the employment of this Council for nineteen years, left to take up a similar employment with the Central Electricity Board. Miss Oliver was a very keen and conscientious worker, and I really wish her well in her new appointment.

The successor to Miss Oliver was Miss Rosalind Godley who entered the service of the Council in April 1962.

I extend a sincere welcome to Miss Godley and trust that she will soon settle down and be happy in the service of the Council.

WATER SUPPLY

The whole of the district has a piped water supply provided by the Newcastle and Gateshead Water Company.

I am again indebted to the General Manager and Engineer, and to the Chief Chemist of the Company for supplying me with the following details relating to the bacteriological and chemical examination of the water supplied to the urban district.

Bacteriological Examination.

The total number of samples examined was 1246.

Classification.	Number.	% of Total.
Excellent. Satisfactory. Unsatisfactory.	1236 7 3	99.2 0.6 0.2

29.

RESULTS OF CHEMICAL ANALYSES OF WATER SUPPLYING THE GOSFORTH AREA

	Max.	Min.	Mean.
pH Value Free CO ₂ Alkalinity (as CaCO ₃) Hardness (as CaCO ₃)	7.3	6.0	6.9
	19	7	10
	122	14	72
Total	140	64	108
Carbonate	122	14	72
Non-Carbonate	54	16	36
Calcium	98	36	72
Magnesium	52	14	36
Chlorides (as C1) Sulphates (as S04) Silica (as Si02) Fluorides (as F) Iron (as Fe) Manganese (as Mn) Free & Saline Armonia (as N) Albuminoid Ammonia (as N) Nitrates (as N) Oxygen absorbed from	20 52 5.2 0.3 0.11 (0.05 0.25 0.29 0.6	10 18 .06 0.1 0.01 (0.05 0.01 0.01	14 36 2.9 0.1 0.03 (0.05 0.06 0.07
permanganate Dissolved Solids	5.8	0.6	1.3
	210	145	180

Chemical results in milligrams per litre.

Refuse Collection and Disposal.

Refuse Collection: -

During the year a weekly collection of refuse from all premises throughout the district was maintained.

This standard was achieved even during periods following public holidays. Previously, following these specific periods, I received the usual crop of complaints alleging delays in the collection of refuse. To meet this situation a simple remedy was applied, and that was to engage the collecting staff on overtime following the holidays. This procedure was something I have recommended many times during the past few years.

Naturally the remedy incurred a small additional expense, but the advantages gained was threefold, the object was achieved, the critics were silenced, and the complaints were eliminated.

Refuse Storage: -

Dealing with this aspect of public cleansing, I thought it might not be inappropriate to refer to the Annual Report for 1901 of one of my predecessors, and to quote an extract therefrom:-

"Scavenging is not yet carried out in a satisfactory manner, complaints are somewhat frequent, not only at the inadequate manner in which the ashpits are emptied, but at the lack of promptitude displayed by the Contractors engaged in this work, I hope however that those who are doing this work will, as they become more accustomed to it, be able to accomplish it more expeditiously. One feels that the time will come when the introduction of wooden tubs for the disposal of all refuse, will become a necessity."

A further Report for the year 1903, states that the introduction of wooden bins for the disposal of house refuse, an important step in the direction of proper sanitation, is being gradually accomplished.

I think it is generally accepted that during the last sixty years a great deal has been accomplished in this particular field, the ultimate object being the hygienic storage, collection and disposal of refuse.

The galvanised steel dustbin with close-fitting cover, is universally accepted as the means for the hygienic storage of refuse. From the point of view of noise abatement, a further progressive step has been made with the introduction of the rubber lid and rubber "feet" to the bottom rim of the bin.

During the past two years, the paper sack as a medium for the storage of refuse has become more realistic. This system possesses obvious advantages from the point of view of hygiene and noise abatement, and it is suggested, a reduction in labour costs.

During the early part of the year, I reported that the small pilot scheme which I had initiated, embracing the paper sack system, had proved satisfactory. It was resolved that the scheme be extended to cover some two-hundred dwellings.

Towards the end of the year a resolution by the Council authorised me to extend the system so as to cover a further two-hundred dwellings, bringing the total of dwellings so covered to just over four-hundred.

On the question of cost I think any saving is directly proportional to the extent of the scheme. A small scheme such as that operating in this district where less than 5% of the houses are covered, could not be expected to show any great saving. It must be stressed however, that the advantages of hygienic storage and collection, dustless loading and elimination of noise are factors which must be put on the credit side of the account.

Refuse Disposal.

The tipping of refuse at Benton Tip ceased at the end of the 1961/62 year, and during the whole of the 1962/63 year, the Palmersville Tip, situated in the Urban District of Longbenton was the main disposal point. The average distance from Gosforth to the disposal point and return is approximately 10 miles.

From Gosforth alone 3617 loads were deposited in the tip, representing an estimated tonnage of 13829 tons of refuse, an increase of approximately 500 tons over the previous year.

The expenditure incurred in the disposal of refuse is equally borne by the Longbenton and Gosforth Councils.

Once again it is my pleasure and privilege to voice on your behalf our sincere thanks to the Chairman and members of the Longbenton Council for continuing to provide to this Council facilities for the disposal of refuse. In this particular regard I would also like to mention Mr. Lockey, Senior Public Health Inspector to the Longbenton Council.

Salvage Disposal.

The quantity of waste paper forwarded to the Board Mills during the financial year ended the 31st March 1963, was 276 tons, a decrease of 50 tons over the previous financial year.

The figure of 276 tons per annum represents 0.86 tons per month per 1000 of population and realised an income of £2261, a decrease of £494 over the previous year.

The reduction in the quantity of waste paper despatched from the depot was directly attributable to the restriction on deliveries of waste paper imposed by the Board Mills. This Council was restricted to 23 tons 15 cwts of waste paper per month.

I have always maintained that this district should be capable of producing results far in excess of 1.0 ton per 1000 of population per month. Alas, even taking into consideration the restriction on delivetes, this target could not have been reached let alone improved upon. During the year there has been a noticeable drop in the quantity of waste paper brought into the depot. This may be due to some extent to apathy on the part of the collectors or on the part of the residents, or possibly, to a combination of both. I think it is true to say that some residents, are still not "waste paper conscious," fortunately, they are in the minority.

The tonnage of the various grades of waste paper forwarded to the Board Mills during the year, and the income received from the sale thereof is as follows:-

Grade.	T.	C.	Q.		£.	S.	d.
Mixed Paper Fibreboard Newsprint	48.	14. 3. 19.	1.		610.	15.	7. 9.
	continues startes	17.		£	2260.		2.

Costing Returns (1962-63)

At the time of compiling this report the Ministry of Housing and Local Government's Manual on Public Cleansing Costing Returns for the 1961-62 financial year in respect of the larger urban areas in England and Wales was still not available. Consequently I was not able to compare the costs of this Authority with Authorities of comparable population for this particular year.

The cost appertaining to this district and relating to 1000 of population and per 1000 premises is described below and for the sake of comparison I have again covered a period of four years. I have also included similar costs relating to districts with a population range of under 30000 so far as the figures are available.

Per 1000 of population

TOT TOOC OF POPULATION				
	1959/60 £	1960/61 £	1961/62 £	1962/63 £
Gosforth U.D.C.	622	622	7 05	733
Other Authorities	636	677	_	_
Per 1000 premises				
	1959/60	1960/61	1961/62	1962/63
	£	£	£	£
Gosforth U.D.C.	1734	1792	2000	2089
Other Authorities	1903	2071		-

Staff: -

Sickness among the manual staff showed a fair decrease upon the previous year. The amount involved being £357, representing some 1343 man-hours, as against £484, representing 1988 man-hours for the previous year.

I would like to refer to the resignations of Mr. Mark Hindhaugh and Mr. Edward Tate, both of whom had been employed in the Health Department as refuse collectors.

Mr. Hindhaugh retired on the 23rd January, 1962, having attained the age of 65 years, and having served the department for thirty years.

Mr. Tate, who was 62 years of age retired on the 16th January 1962 on grounds of ill-health. He had been employed in the Health Department for the past twenty years and as far as I understand, he had been associated with the Council since about 1924.

Both of these workmen were extremely reliable and conscientious, and I really wish them well in their retirement.

Mr. Bishton, who succeeded Mr. Cusack as foreman, has fully justified the confidence placed in him. I would like to take this opportunity of thanking him and all the outside staff for their splendid efforts throughout the year.

34.

COST ØF STATEMENT 1962 - 63

Item	Particulars 1	Collection.	Disposal 3	Totals.	Percentage of total gross expenditure
1	REVENUE ACCOUNT (note (a)) GROSS EXPENDITURE: (i) Labour (note (h)) (ii) Transport (note (c)) (iii) Plant, equipment, land	£ 11459 5240	£ 1368 2194	£ 12827 7434	% 58•5 33•9
	and buildings (note (d)) (iv) Other items (note (e)) (v) Total gross expenditure	129 190 17018	27 1318 4907	156 1508 21925	100
2	GROSS INCOME (note (f)) NET COST	31 16987	2261 2646	2292 19633	
4	Capital expenditure met from revenue (included above) (note (g))				
5 6	UNIT COSTS (note (h)) Gross cost per ton, labour only Gross cost per ton, transport only Net cost (all expenditure) per ton	s. d. 16. 7. 7. 9.	3 . 2.	s. d. 18. 7. 10. 11. 28. 5.	
	Net cost per 1,000 population Net cost per 1,000 premises	£ 634 1808	£ 99 281	£ 733 2089	

OPERATIONAL STATISTICS

10. 11. 12. 13. 14. 15. 16. 17.	Area (statute acres) - land and inle Population at 30th June 1962 (Regist Total refuse collected (tons) (Estite Weight (cwts) per 1,000 population. Number of premises from which refuse Premises from which collections are Average haul, single journey, to fice (including miles by secondary to Kerbside collection expressed as escollection	strar-General's Estimate) imated weighings) per day (365 days to year se is collected e made at least once week inal disposal point ransport) stimated percentage of to Nil tons were disposed ded):	26780 13829 28.3 cwts 9397 premises cly 100 % of total
20.	Salvage. Analysis of income and to	onnage:	100 %
		Income (Included in Item 2)	Tonnage Collected (Included in Item 12)
		£	Tons
	(a) Raw Kitchen Waste (note (a)) (b) Scrap Metal (c) Waste Paper (d) Other Salvage	2261	276
	(e) Totals	£ 2261	276

NOTES

- (a) Comprising the expenditure directly attributable to the service, including sums paid to other local authorities. Excluding all expenditure and income arising from the operation of kitchen waste processing plant but including expenditure on normal collection of raw kitchen waste and (against Items 2 and 20 (a)) an appropriate amount of income corresponding to its sale.
- (b) "Labour" means all employees other than clerical staff, drivers and mechanics. Expenditure includes holiday and sick pay, bonus payments, all superannuation charges, employer's contributions to national insurance and the cost of protective clothing and uniforms.
- (c) Transport means all types of vehicles and expenditure includes running and maintenance costs, wages of drivers and mechanics and other revenue expenses (including loan charges).
- (d) Including running costs, maintenance expenses, loan charges and all sums charged to revenue account in respect of the provision or renewal of buildings, plant, dustbins, etc. Costs of war damage repairs should be excluded.
 - (e) Including salaries and wages not already mentioned, payments to other local authorities for collection and/or disposal of refuse and payments to contractors. Excluding all administration and office expenses. No part of the Chief Officer's salary should be included.
 - (f) To ensure statistical uniformity all salvage income (except raw kitchen waste) should be credited to Disposal. Trade refuse collection income should be credited two-thirds to Collection and one-third to Disposal. Income from raw kitchen waste should be credited to the account which bears the cost of its collection.
 - (g) Item 4 excludes and Item 1 includes loan charges and contributions to depreciation funds.
 - (h) Gross unit costs of collection and disposal should be based on the tonnages shown at Items 12 and 18 respectively but the net cost of disposal should be based on the tonnage of the Council's own refuse, i.e. excluding refuse received from other local authorities.

Housing.

Of the one hundred and seventeen dwelling-houses submitted to the Ministry of Housing and Local Government in 1955, being dwellings classified as likely to be included in a slum clearance programme, forty-two dwellings remained to be dealt with.

These houses, as a result of an amendment in the slum clearance programme, will now be dealt with in 1963. They are mainly made up as follows:-

John Street South 10 Bowes Street 14 Streatlem Terrace 14

When consideration is given to the present standard of fitness of a dwelling-house, which standard is contained in Section 4 of the Housing Act 1957, it raises quite a problem when embarking on the preparation of a further slum clearance programme. It is worthy of note that the matters referred to in this section are virtually the same as those recommended in the Mannual of Unfit Houses 1919.

The General Council of my own Association suggested in 1961 that the standard of fitness should be comparable with the twelve point standard now applicable to discretionary improvements grants. This standard, apart from ensuring that the house would be in a good state of repair and substantially free from damp, would also ensure that the house would be provided with a bathroom, a hot water supply and other facilities, which should not be regarded as something luxuriant, but as essential features of a dwelling-house in this day and age.

I have emphasized in previous reports that there is a fair amount of property in the urban district which is old, but not necessarily unfit, i.e., based on present day standards. It is possible that many of these properties could with the aid of Improvement Grants be developed into well-lighted and well-ventilated houses, possessing modern facilities which most of them are lacking, such as constant supplies of hot water, baths, interior sanitary accommodation, adequate ventilated food storage, and having proper facilities for the preparation and cooking of food.

I am informed by the Engineer and Surveyor that during the year, the number of separate houses for which grants have been made was twenty. The total to date being thirty-eight.

It is not surprising, that speaking generally, the Minister of Housing and Local Government stated that he would like to see a very big increase in the number of houses being improved. The Minister is convinced that for a real impact, Local Authorities must be prepared to make a systematic approach to the problem - tackling it street by street, or area by area.

A suggestion as put forward by my own association is worth considering in that Local Authorities should have power to declare "Improvement Areas", following a procedure similar to that used in the declaration of clearance areas.

The Rent Act 1957.

During the year only one application for a Certificate of Disrepair was received, and the matter was resolved following the service of a Form J. on the Landlord.

Numerous enquiries have been received in connection with the operation of the Rent Act, but despite every assistance given to the enquirers, there appears to be a general reluctance to utilise the provisions of the Rent Act.

Housing Statistics.

New Houses completed during the year.

(a)	By	local	authority	10

(b) By private persons 26

Closing and Demolition.

(a) Houses demolished in Clearance Areas	(a)	ses demolished	in	Clearance	Areas	7
--	-----	----------------	----	-----------	-------	---

- (b) Houses closed but not demolished 1
- (c) Other houses permanently discontinued as dwellings and not included above. 19

Unfit houses made fit.

- (a) After informal action by local authority 42
- (b) After formal action by owners.

Clean Air Act, 1956.

Smoke Control Areas.

In the early part of the year the Minister of Housing and Local Government intimated that certain changes in procedure would make it easier for Local Authorities to carry through their smoke control programmes quickly. For example he would not in future, normally require the estimated and final costs of the adapting and replacing of fireplaces in privately owned dwellings, as distinct from dwellings owned by Local Authorities, to be submitted in the detail hitherto required.

The Minister further stated that a number of Authorities had been deterred from preparing programmes because they had been concerned about the effect of smoke control on persons receiving coal at concessionary rates from the National Coal Board. The National Coal Board and the Trade Unions had reached agreement whereby the great majority of such persons would in smoke control areas be entitled to receive solid smokeless fuel or cash payments instead of coal and the Minister trusted that this would remove the obstacle in these cases and that programmes would now be submitted. He asked Authorities on the list who for any other reason had not yet prepared programmes, to consider again most carefully, whether their present policy was consistent with the health and well-being of their communities.

The question of establishing smoke control areas must obviously depend upon the availability of suitable smokeless fuels, and there would appear to be a scarcity of not only premium smokeless fuels but of "open-fire cokes", in the Northern region.

It is understood that supplies of hard coke are available in sufficient quantities and the Minister of Housing and Local Government urges Local Authorities in the Northern region to encourage a greater use of this fuel as an alternative to other smokeless fuels. The use of hard coke is considered suitable for closed and openable stoves, and the Minister has stated that the full rate of grant under the Clean Air Act will be paid on the installation of solid fuel stoves in smoke control areas.

During the year I submitted to the Health Committee a report on potential smoke control areas which are contained on the west side of the Great North Road, and involve approximately ninteen hundred dwelling-houses.

Having regard to the fact that most householders appear to have an aversion for closed or openable stoves, plus the knowledge that "open-fire coke" is not available in sufficient quantities, Local Authorities are faced with quite a problem when considering establishing smoke control areas, or, if having already embarked on such schemes, in making further progress in that connection.

DRAINAGE SYSTEMS AND DRAIN TESTING.

A total of nearly six hundred visits were made in connection with drain testing and dealing with queries relative to the lay-out of such systems.

One hundred and sixty-nine water tests were carried out, covering just over sixteen hundred yards, and forty-three smoke tests were applied.

The bulk of this work was mainly associated with the construction of new dwelling-houses, and the construction of two new schools.

Rodent Infestation.

There was a slight increase in the number of complaints received during the year in this particular connection, one hundred as against eighty-six for the previous year.

The premises involved being one hundred and fifty-eight private dwellings and six business premises, incurring a total of nine hundred and fifty-eight visits.

Primary inspection revealed that thirty-seven of the private dwellings were infested with mice; the eighty-six private dwellings and the six business premises were found to be infested with rats. No evidence of either rats or mice could be found in the remaining thirty-five private dwellings.

No major infestations were encountered in either private dwellings or business premises, and the infestations were found to be fairly well scattered throughout the district.

As in previous years the rodenticide Warfarin with a bait base of oatmeal was used with effective results.

There was no evidence of any serious infestations occurring in the food premises. This could well be directly attributable to the fact that many of the food traders have their premises regularly serviced.

Disinfestation.

The number of complaints received in the department was thirty-three, as against thirty-seven for the previous year.

Activities, in this particular field again covered a wide range of insects, the most troublesome being the cockroach. There were no complaints of bed bug infestation.

Apart from treating premises against infestation by the more common type of insect, advice was also given on ridding premises of rabbits and on the abatement of nuisance created by the presence of pigeons.

Although not strictly coming within the scope of this particular subject I should mention that a number of complaints have been received concerning the fouling of pavements by dogs.

This is a very vexed and complex problem which could well be resolved by the complainants themselves if only they would come forward and give practical evidence in support of their complaints.

The fouling of pavements etc., by dogs, is a matter controlled by a bye-law made by the Northumberland County Council in pursuance of Section 249 of the Local Government Act 1933, and enforced by the Police.

In an endeavour to eradicate or at least minimise this nuisance, efforts have been directed towards bringing to the notice of the public the knowledge of the existence of the bye-law.

Shops Act, 1950.

During the year four hundred and sixty-six visits were made to various shops in the district. No formal action was taken under the Act, but it was found necessary to serve thirty-two informal notices, most of which were principally concerned with arrangements for health and comfort of shop-workers.

Many queries were received and duly answered on various aspects of the Shops Act, particularly with reference to general closing hours and Sunday Trading.

It would appear that the matter concerning the bringing of the mobile trader within the scope of the Shops Act has not yet been resolved.

Factories Act 1961.

PART 1

INSPECTIONS.

	Premises	Number on	Number of			
			Inspections	Written Notices	Occupiers Prosecuted	
	(1)	(2)	(3)	(4)	(5)	
(i)	Factories in which Sections 1, 2, 3, 4, and 6 are to be enforced by Local Authorities	1	6	Nil	Nil	
(ii)	Factories net included in (i) in which Section 7 is enforced by the Local Authority	70	144	10	Nil	
(iii)	Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	5	15	Nil	Nil	
	Total	76	165	10	Nil	

Cases in which DEFECTS were found.

Particulars	Ni	Number of cases in which defects were found				
	Found	Remedied	Inspector	by H.M. Inspector	which pro- secutions were instituted	
(1)	(2)	(3)	(4)	(5)	(6)	
Want of cleanliness (S.1)	Nil	Nil	Nil	Nil	Nil	
Overcrowding (S.2)	-	-	-	-	-	
Unreasonable temperature (S.3)	-	-	-	-	-	
Inadequate ventilation (S.4)	-	-	-	-		
Ineffective drainage of floors (S.6.)	-		-		-	
Sanitary Conveniences (S.7) (a) Insufficient		-	-	-	-	
(b) Unsuitable or defective	10	10	-	_	-	
(c) Not separate for sexes	-		-	-	-	
Total	10	10	Nil	Nil	Nil	

PART V111

(OUTWORK)

	Section	n 110	Section 111			
Nature of	No, of out- workers in August list required by Section 110 (1) (c)	cases of default in sending lists to	prosec-	instances		Prosec- utions
(1)	(2)	Council	(4)	(5)	(6)	(7)
Wearing) making apparel) etc.	4	Nil	Nil	Nil	Nil	Nil
)cleaning)and)washing	644	-	-	-	-	-
Stuffed toys	1	Nil	Nil .	Nil	Nil .	Nil
Total	5	Nil	Nil	Nil	Nil	Nil

Inspection of Food and Food Premises.

Milk Sampling.

Thirty-five samples of Tuberculin Tested (Farm Bottled) Milks were procured and submitted to the Methylene Blue Keeping Quality Test. Thirty-three samples representing 94.3% of the number submitted satisfied the test. Although the overall result is less satisfactory than the previous year when the corresponding figure was 97.0% it is still a vast improvement upon the results for the three years 1958-1960, when the results were 73.0%; 69.4%; and 83.3% respectively.

Subsequent to receiving complaints alleging the poor keeping quality of a specific supply of pasterrised milk two samples were procured and found to satisfy both the Methylene Blue Keeping Quality Test and the Phosphatase Test. Samples of this particular grade of milk are normally procured by the County Sanitary Officer.

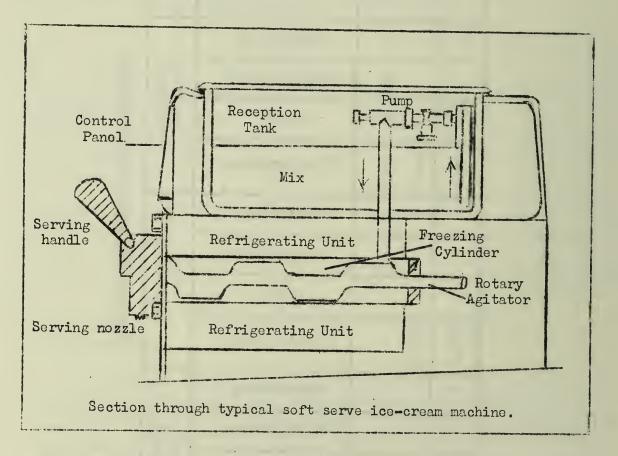
TOTALS.	Pasteurised.	Tuberculin Tested (Farm Bottled)	GRADE					
35	33		2 33		Satisfactory			
רא	1	2	Unsatisfactory	Methylene Blue Test				
37	2	35	Total	ylene Test				
94.6	100.0	94.3	% Satisfactory					
2	N	1	Satisfactory					
ı	1	1	Unsatisfactory	Phosphatase Test.				
2	N 1		Total	natas				
100.0	100.00		% Satisfactory	O.				
7	- 7		7		Satisfactory			
1	1 (1 1		1 1		Unsatisfactory	Biolo Te
7	1	7	Total	logical Test.				
100.0	1	0.00I	% Satisfactory					

Bacteriological Examination of Milk.

Ice Cream Sampling.

During the year thirty-three samples of ice-cream were procured and submitted to the Methylene Blue Keeping Quality Test.

It will be observed that more than one-third of the samples procured were of the "soft" type, as opposed to the hard frozen variety. It appears that there is a growing popularity for this type of ice-cream which is comparatively easy to manufacture and which has led to developments in "soft serve" machines.



The ice-cream mix, either liquid or powder, if the latter, then it has to be reconstituted with water, is placed in the machine, it is then whipped and frozen rapidly so that although the temperature is brought down to a suitable level, the ice-cream remains semi-fluid. The ice-cream is then dispensed through a nozzle into a cone or a carton.

	e of Sample Procured		Time taken to Reduce Methylene Blue	Provisional Grade	Percentage of total	
Prewrapped	Loose	Soft	me onytene bruc			
11 1 - -	3 - 3 2	10 2 - 1	4 hours or more 2½ hours - 4 hours ½ hour - 2 hours 0 hours	1 2 3 4	72.73 9.09 9.09 9.09	

It is a matter of some regret that nearly 30% of the samples procured failed to reach Provisional Grade 1, and that over 18% were placed in Grades 3 and 4. Out of four samples taken from one producer-retailer, one was placed in Grade 1, one in Grade 3 and two in Grade 4.

I think it would not be inappropriate to reiterate the observations made by the sub-committee appointed to enquire into tests for the bacteriological grading of ice-cream:

"Owing to the numerous factors governing the hygienic quality of ice-cream it is unwise to pay too much attention to the bacteriological results of any single sample. Judgement should be based rather on a series of samples. It is suggested that over a six monthly period 50% of a vendor's samples should fall into Grade 1, 80% into Grades 1 and 2, not more than 20% into Grade 3 and none into Grade 4."

Many writers' have indicated that it would be very useful to have a bacteriological standard for ice-cream.

It should be borns in mind that the Methylene Blue Test as applied to ice-cream is not a statutory test and that it has no legal standard. The test is a measure of bacterial cleanliness, and also an assessment of the hygienic preparation of the commodity. Apparently the objections against using the Methylene Blue Test as a statutory Test are mainly because of technical difficulties and interpretations.

Food and Drugs Act 1955.

Section 62 (Licensing of Slaughter-Houses).

There are no slaughter-houses in the district. The slaughter-house which was situated at the rear of 160 High Street, ceased to function as such at the end of March 1960.

Food Premises.

There are one hundred and seventy-two food shops in the district, details of which are shown in the following table:-

Type of Premises	No.	Type of Premises	No.
Grocers General dealers Meat purveyors Fruiterers Licensed premises Confectioners	25 22 22 15 24 19	Retail bakers Premises with 'Off-Licence' Fishmongers & Poulterers Bakehouses Fried Fish & Chips Cafes	15 11 6 4 5 4

Nearly- eight-hundred visits were made to the various food premises in the district, subsequent to which it was found necessary to serve one hundred and thirty-two informal notices including reminder notices.

Legal action under the Food Hygiene (General) Regulations 1960 was taken against two food traders for failing to provide an adequate supply of clean and wholesome water being a supply either of hot and cold water or of hot water at a suitably controlled temperature, for the use of persons engaged in the handling of food on their premises.

Convictions were recorded in each case.

Despite the prevailing general high standard of hygiene in the food shops it was still possible to make further progress in this particular field. In this particular regard mention should be made of securing through the co-operation of the traders concerned, improved facilities for the protection from risk of contamination of open food, and notably on licenced premises, the securing of additional and improved washing facilities for the use of persons engaged in the handling of food.

Food and Drugs Act 1955.

Section 16 (Registration of food premises).

During the year five food premises were registered under Section 16 of the Food and Drugs Act 1955. Two premises were registered for the manufacture of ice-cream; two premises for the sale of ice-cream and one premises for the preparation or manufacture of sausages, or potted, pressed, pickled or preserved food intended for sale. The number of premises now registered under Section 16 of the Food and Drugs Act is ninety-nine.

Sixty-nine premises are now registered for the sale of ice-cream; two premises for the manufacture of ice-cream and twenty-eight premises for the preparation or manufacture of sausages, etc., etc., intended for sale.

The type and number of food premises registered as aforesaid, are shown as follows:-

Type of Premises No. Regd.	Type of Premises No. Regd.
General Dealers 21 Meat Purveyors 17 Confectioners 15 Grocers 19 Fried Fish & Chips 5	Bakehouses 4 Retail Bakers 7 Fruiterers 5 Fishmongers 2 'Off-licence' 3 Cafe 1

Food and Drugs Act 1955.

Section 2. (General protection for purchasers of food and drugs). Section 8. (Sale, etc., of food unfit for human consumption).

During the year three complaints were received alleging the unfitness of food intended for sale for human consumption. These may be summarized as follows:-

- (a) Half-pint bottle of milk containing fragments of broken glass.
- (b) Mouldy condition of a pork sandwich.
- (c) Extraneous matter in a loaf of bread.

In connection with complaint (a) legal proceedings were instituted and the firm, who pleaded guilty to the charge, were fined £10 plus costs.

No action was taken with regard to complaints (b) and (c) as it was felt there was a doubt in the evidence as supplied by the complainants.

The Milk and Dairies (General) Regulations 1959.

Part 1X. Article 27 (Cleansing and storage of vessels etc.).

A complaint was received alleging the delivery of a pint of milk in a bottle which was not in a state of thorough cleanliness.

Although the firm concerned accepted responsibility for the infringement of the Regulations no action was taken as the complainant was not prepared to come forward and give evidence.

Unsound Food (Voluntarily Surrendered).

The following articles of food, weighing 116 pounds were examined following their voluntary surrender, and condemned as unfit for human consumption.

This food, not considered suitable for processing was destroyed in the incinerator in the Council Yard.

8 tins of meat

1 tin of fish

9 tins of fruit l hamper of potatoes

Adulteration of Food.

I am again indebted to Mr. C.L. Arlidge, Chief Inspector of Weights and Measures, Northumberland County Council for supplying me with details of samples taken by his sampling officers in the Urban District of Gosforth during the year under review.

Mr. Arlidge informs me that one hundred and five samples were procured which included four samples of fruit and vegetables which were tested for insecticide contamination, and tan samples taken at a school canteen.

The following two samples were reported unsatisfactory by the Public Analyst: -

Article.

Milk. (Complaint from Purchaser).

Reindeer Meat Balls in Brown Gravy.

Analyst's Report.

Contained 50.6% extraneous water.

Label stated ingredients of this article to be about 80% reindeer meat, 10% beef meat, lard, etc., which implies 90% meat. This sample contained 47% meat.

Action taken.

Producer-retailer fined £40 and £3 costs.

Importers fined £20 and £15 costs.

TABLE 1.

(Complaints received and dealt with)

Nature of Complaint.	No. of Complaints.
Accumulations Atmospheric Pollution	13 1
Dampness (Dwelling House)	6
Defective Drains Defective dustbins	2 21
Disrepair (Dwelling House)	33
Extraneous matter in food Foul Smells	8
Noise Nuisance	12 2
Overcrowding	1
Vermin (Insects) Vermin (Rats and Mice)	33 100
Miscellaneous	15
	2L7
	241

TABLE 11.

(Summary of Visits)

Accumulations	30 (78
Dwelling Houses Cinemas and Dance Halls	678
Ditches and Streams	4 8
Drainage Systems	398
Drain Test: - Smoke	17
	47
Water	153
Factories (Mechanical)	144
(Non-mechanical)	6
(Outworkers)	701
Food Premises	784
Food Traders (Mobile)	12
Infectious Diseases Enquiries	38
Disinfections	5
Revisits	227
National Assistance Act	2
Rodent Infestations:-	70.7
Rats	703
Mice	255
Refuse Collection - Supervision	564 466
Shops Act	24
Smoke Observations	4
Tents, Vans and Sheds Verminous Premises	110
	22
Workplaces and Offices Miscellaneous	313
MIRGELTaneonz	ノエン
Total	5004
	J00-7

TABLE 111

(Sanitary Improvements Effected)

Ceiling Plaster repaired or renewe Chimney Stacks repaired Dangerous walls repaired Doors repaired, rehung or renewed Eaves-gutters cleaned-out, rep'd o		4 3 1 11
External Walls pointed Fallspouts repaired or renewed Firegrates repaired Floors repaired, ventilated etc.		6 4 1 4
Roofs repaired, ventilated etc.		12
Sashcords renewed		
Sink Waste pipes renewed/repaired		5 1
Sink draining boards renewed/repai	red	1
Skirting boards renewed/repaired		1
Etaircase repaired		3
Wallplaster repaired or renewed		2
Water supplies renewed/repaired		2
Windows repaired; made to open		1
Yard paving repaired		1 3 2 2 1 4 3 55 3 2
Choked drains cleansed		3
Dustbins provided		55
W.C. cisterns repaired or renewed	,	5
W.C. structures repaired or renewe	a	4
W.C. basins renewed		4
	Total	144
	20 002	

CONCLUSION.

In concluding my report I would like once again to express my sincere appreciation for the kind support I have received throughout the year from the Chairman of the Council, the Chairman of the Health Committee and from all other members of the Council. I am deeply grateful for the sympathetic and courteous manner in which my reports to the various committees have been received and dealt with.

I would also like to thank Dr. Hopper and the Clerk to the Council for their advice and support, and to express my appreciation to the other Chief Officials for the co-operation received in dealing with the many and varied matters occurring during the year.

Lastly, but hy no means the least of my pleasant duties is to refer to the staunch support afforded to me by Mr. Scott, and the clerical staff. Their efforts, have, in no small way, largely contributed to the smooth running of the department.

I am, Mr. Chairman, Ladies and Gentlemen,

Your Obedient Servant,

GEORGE STENGER,

Senior Public Health Inspector.







